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Criminal Strategies for Sustainability:
The Geopolitics of Decarbonization by Plandemic and Depopulation by Vaccination

by

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Mankind is facing two existential problems: first, overpopulation and its corollary overconsumption; and second, environmental stress and its corollary climate change. Neither the gravity nor the magnitude of these problems can be overstated as they are global, chronic, growing and of man's making. They are also the last remaining obstacles to sustainability, which unless accomplished spells the end of our species or at the very least the end of our civilization. Given the urgency of the situation and the lack of options the global leadership has decided to tackle both problems through a manufactured front, that of a global pandemic, which is neither a real nor a natural event but a surreal political fiction. Showing how a non-existent virus is used to address the problems of overpopulation, overconsumption, environmental stress and climate change is the purpose of this paper, as is explaining why the global leadership has chosen this strategy. To this end, I will provide the only honest and thorough analysis of the existing documentary, political, scientific, demographic and technical evidence to date.

Documentary Evidence:

The documentary evidence shows that the plandemic strategy was long in the making, carefully orchestrated and cleverly concealed. Just as with its precursor, fundamental terrorism, which was a front for invading the Middle East and subjecting the Islamic world to the same population control methods as the Christian world, the plandemic strategy has been planned and tested for more than twenty years before it was fully unleashed on the world in 2020. And just as the front of fundamental terrorism was conceived to last two decades so the plandemic strategy, 20 years being the timeframe in which the international system operates. The period 2000 to 2020 was that of manufactured terrorism and was kick started by the military-industrial complex with the September 11, 2001, attack on the Twin Towers of the World Trade Center in New York City. The period of 2020 to 2040 will be that of manufactured pandemics and was kick started in January 2020 in Wuhan, China. And the period of 2040 to 2060 will be that of manufactured cataclysms and will most likely be kick started in Africa or India, but the preparation for this period has already started with the 2020 fires in California and Australia, both of which were engineered events and not natural.

Documentary evidence of planned biological warfare

The documentary evidence shows a modus operandi that has become a predictable five-step pattern which starts with: (1) covert projects or overt exercises for an invented threat by an imagined boogeyman that are then (2) followed by an engineered attack that uses that particular threat or something very similar, is answered with (3) a scientific fix in the form of a vaccine, is backed up by (4) abusive legislation that is supposedly meant to protect people from the very threat the system has invented but that in fact erodes the rule of law and makes fundamental rights and liberties conditional and, last, requires (5) massive institutional and technical buildup of the military-industrial complex and a budget increase to scale up the production and distribution of the said scientific fix.

First Phase (1990-2000):

This pattern was set in the aftermath of World War II but was first used with respect to biological threats in the late 1990s for the supposed benefit of America's military personnel. [Project Clear Vision](#) (1997) and [Project Jefferson](#) (1997) were the covert exercises carried out (step 1). The threat was identified as biological bomblets and anthrax and the boogeyman as Russia though no actual attack was engineered until 2001 when letters containing anthrax were sent to Democratic Senators Tom Daschle and Patrick Leahy (step 2). The fix was to forcibly administer the [Anthrax Vaccine Adsorbed](#) (AVA) to all active duty U.S. service personnel, which started being immunized in March 1998. By the year 2000 some 425,976 US service members had received 1,620,793 doses of AVA (step 3). The abusive legislation came in the form of [Executive Order 13139](#) – entitled Improving Health Protection of Military Personnel Participating in Particular Military Operations – signed by President Clinton on 30 September 1999, and giving the U.S. Secretary of Defense the power to administer an investigational new drug (IND) to U.S. service members for a purpose other than that it was originally licensed (step 4). The institutional and technical buildup of the military-industrial complex came in 1998 the form of the [Johns Hopkins Center for Civilian Biodefense Strategy](#) (currently the Johns Hopkins [Center for Health Security](#)).

American soldiers were used as guinea pigs in this experiment of bacteriological warfare conducted by the US military and many became severely ill with what came to be known as the [Gulf War Syndrome](#). Those who refused to be immunized were compelled to leave the military and some were even court-martialed for resisting the inoculations during the first six years of the program.

The American government has proceeded in this fashion in order to circumvent the [Biological Weapons Convention](#) of 1972, which prohibits the development, production and stockpiling of biological and toxin weapons. By pretending to conduct exercises and research meant to prevent biological attacks on American citizens or soil, the US was able to violate the terms of existing international agreements under the pretext of biosecurity.

Second Phase (2000-2010):

The same five-step pattern was repeated in the first decade of the 21st century but this time to subject the civilian population to biological warfare, though on a small scale, and to involve the international community, as well as to try mass vaccinations on domesticated animals. Since secrecy was no longer an option the projects of the past became the exercises of the present and these were carried out in the open. [Dark Winter: A Smallpox Exercise](#) (22-23 June 2001), [Global Mercury Exercise](#) (8-10 September 2003) [Atlantic Storm Exercise](#) (14 January 2005) and [several exercises](#) undertaken by the World Health Organization in 2006 were carried out as simulation exercises in which smallpox or influenza was the threat and unnamed terrorist groups the boogeyman (step 1). The engineered attacks came in 2002-2004 as the [SARS outbreak](#), in 2004-2005 as the [avian flu pandemic](#), and in 2009 as the [swine flu pandemic](#), which was also the first time the system declared a Public Health Emergency of International Concern (PHEIC no. 1) to test its international response (step 2). The scientific fix was once again vaccines for the civilian population (the [H5N1](#) and [H1N1](#) vaccines) and close global cooperation to restrict travel and limit civil liberties but also to evaluate communication protocols (step 3). Abusive legislation at the national level came in the form of the [Public Health Security and Bioterrorism Preparedness and Response Act](#) (PHSBPRA), which was signed into effect in the US on 12 June 2002 and opened the door to the detention of people communicable diseases. Internationally, it came in the form of [Public Health Emergencies of International Concern](#) (PHEIC), an instrument created to transfer global control over what constitutes a health threat from the national to the global level and to force nations to act in accordance with decisions taken by the World Health Organization (step 4). Massive institutional and technical buildup of the military-industrial complex within the US came in 2002 in the form of the [National Defense Analysis and Countermeasures Center](#) (NBACC); in 2005 with the [National Interagency Biodefense Campus](#) (NIBC), in 2007 with the [National Institute of Allergy and Infectious Diseases Integrated Research Facility](#) (NIAID), and in 2008 with the [National Biodefense and Countermeasures Center](#) (NBACC), all of which are located at the biodefense campus at Fort Detrick in Frederick, Maryland. Internationally, it came in the form of the 2001 [Global Health Security Initiative](#), and the [International Health Regulations](#) of the WHO [revised in 2005](#).

The avian and swine flu “pandemics”, or more accurately said *plandemics* (since they were planned by the system and not naturally occurring events) allowed the system to test its engineered viruses and vaccines on domesticated animals before targeting civilians, which gave the system the added benefit of culling tens of millions of chickens and pigs so as to artificially raise the price of meat in order to lower its consumption; a strategy that aims to feed more people across the world with a vegetable based diet, millions of tons of grains being thus diverted from feeding domesticated animals to feeding people.

Third Phase (2010-2020):

The third five-step pattern covered the second decade of the 21st century and took biological warfare and mass vaccinations to the civilian population at large so as to increase vaccine manufacturing capacity for global administration and to prepare the public for mandatory vaccines under the pretext of public health and pandemic prevention. [Lock Step 2010 Scenarios](#) (May 2010), [Berlin 2017 G20 Health Ministers Meeting](#) (19-20 May 2017), [Clade X Exercise](#) (15 May 2018) and [Event 201 Exercise](#) (18 October 2019) were carried out as future scenarios and simulation exercises for various influenza pandemics (step 1). The engineered attacks came in 2013-2015 as the [MERS outbreak](#), in May 2014 as the [Polio Public Health Emergency of International Concern](#) (PHEIC no. 2), in August 2014 as the [Ebola Public Health Emergency of International Concern](#) (PHEIC no. 3), in February 2016 as the [Zika Public Health Emergency of International Concern](#) (PHEIC no. 4), and in July 2019 as the [Kivu Ebola Public Health Emergency of International Concern](#) (PHEIC no. 5) (step 2). The scientific fix was once again vaccines for the civilian population ([IPV](#), [OPV](#), [rVSV-ZEBOV](#), [cAd3-ZEBOV](#), and various [Zika vaccines](#)), but this time around regional quarantines were tried and tested as well as coercive mass vaccination campaigns, mandatory mask mandates, intubations as a treatment procedure, and the false science of PCR tests was employed for the first time and used to inflate the number of infections and to justify the suspension of fundamental rights and liberties for entire nations. To increase the number of vaccines administered, the system introduced the concepts of “compassionate use” and “ring vaccination strategy” to purportedly protect persons of highest risk, i.e. contacts of those infected, contacts of those contacts and front-line medical personnel. And to increase the fear factor the system unleashed false science to deceive the public that the virus “hides” in a recovered survivor’s body for years and becomes active either in the same individual or in a sexual partnerⁱ (step 3). Abusive legislation at the national level came in the form of biosecurity acts, or changes to existing health legislation, adopted by virtually every G20 nation, granting governments the power to suspend any and all fundamental rights and freedoms under the guise of protecting the public’s health and safety (Australia’s 2015 [Biosecurity Act](#), Canada’s 2009 [Human Pathogens and Toxins Act](#), the UK’s [Civil Contingencies Act 2004](#) the [Health and Social Care Act 2008](#) and the [Health Protection \(Notification\) Regulations 2010](#), the EU’s 2013 [Decision No. 1082/2013 on Serious Cross-Border Threats to Health](#), etc.). Abusive legislation at the international level came in the form of the 2018 [WHO, World Health Assembly, Implementation of the International Health Regulations \(2005\): five-year global strategic plan to improve public health preparedness and response, 2018-2023, WHA71\(15\)](#), which gives national governments a free hand to legally enact abusive measures in response to public health risks. The final destruction of the [Nurnberg Code](#) and the legal doctrines of [beneficence](#), [non-maleficence](#) and [informed consent](#), however, are embodied in the EU’s [2019-2022 Vaccine Roadmap](#), whose final objective is “*a common vaccination card/passport for EU citizens*” and in the 2016 US [National Adult Immunization Plan](#) and its [Path to Implementation](#), which also seeks universal adult vaccination (step 4). Massive institutional and technical buildup of the military-industrial complex came in the form of the 2018 [World Economic](#)

[Forum's Global Health Security: Epidemics Readiness Accelerator](#), a plan of public-private cooperation on how best to mitigate the economic losses of a plandemic while (a) suspending travel and tourism, (b) crippling supply chains without impeding the flow of strategic commodities, (c) lifting all legal and regulatory barriers to the use of experimental vaccines on the global population, (d) suppressing all scientific and media sources of information that contradict the official propaganda, and (e) controlling access to the demographic and statistical data in order to sustain the illusion of a pandemic (step 5).

Fourth Phase (2020-2030):

The stage having been set for the death blow to the world as we know it and the annihilation of all remaining pretenses of democracy, rule of law and fundamental rights and liberties, the covid-19 plandemic was unleashed and with it the fourth phase of the system's five-step pattern begun.

At the top of this global biological warfare apparatus stands the [Battelle Memorial Institute](#), a private nonprofit applied science and technology development company headquartered in Columbus, Ohio, which masquerades as a charitable trust organized as a nonprofit corporation under the laws of the state of Ohio and is exempt from taxation under Section 501(c) (3) of the Internal Revenue Code because it is organized for charitable, scientific and education purposes.

The Battelle Memorial Institute is the coordinating agency of the plandemic era as it manages virtually every arm and tentacle of the American military-industrial complex.

Battelle [manages](#) of behalf of the United States Department of Energy the following national laboratories:

- [Brookhaven National Laboratory](#) (through Brookhaven Science Associates, LLC – a collaboration between Battelle and [Stony Brook University](#))
- [Idaho National Laboratory](#) (through the Battelle Energy Alliance – a collaboration between Battelle, BWX Technologies, Inc., Washington Group International, [Electric Power Research Institute](#) and an alliance of universities)
- [Lawrence Livermore National Laboratory](#) (through Lawrence Livermore National Security, LLC – a collaboration between Battelle, [BWX Technologies](#), Inc., [Washington Group International](#), the [University of California](#), Bechtel National, and The [Texas A&M University System](#))
- [Los Alamos National Laboratory](#) (through Triad National Security, LLC – a collaboration between Battelle, the [University of California](#), and The [Texas A&M University System](#))
- [National Renewable Energy Laboratory](#) (in partnership with MRIGlobal as part of the Alliance for Sustainable Energy, LLC)
- [Oak Ridge National Laboratory](#) (through [UT-Battelle, LLC](#) – a collaboration between Battelle and the [University of Tennessee](#))
- [Pacific Northwest National Laboratory](#)

Additionally, on behalf of the [Department of Homeland Security](#) it manages:

- [National Biodefense Analysis and Countermeasures Center](#)

National Science Foundation projects:

- In March 2016, Battelle was selected to manage the completion of the [National Ecological Observatory Network](#) (NEON) for the [National Science Foundation](#).

Two questions arise from this bizarre structure:

1. Why would a private institute be at the helm of the entire public American military-industrial complex?

Because that is how the US government can shield its depopulation by vaccination and decarbonization by plandemic strategies from public scrutiny and accountability in order to commit crimes against humanity and genocide. A private nonprofit institute cannot be subjected to public oversight and can therefore hide secrets that could otherwise be obtained from a public body through freedom of information requests.

2. Why would a private nonprofit organization manage all US government organizations specialized in energy (nuclear and otherwise), environment and biodefense?

Because in order to pursue depopulation by vaccination and decarbonization by plandemic under a unified plan you need to control and coordinate the entire gamut of institutions with expertise in energy, environment and biodefense. Furthermore, various institutes could be delegated to play a small part in a grand plan without its employees realizing that they are participating in a global program of depopulation by vaccination and decarbonization by plandemic.

While the system has been using the mass media to misdirect our attention to Wuhan, China, as the source of the pandemic, the true source lies in Columbus, Ohio, at the headquarters of the Battelle Memorial Institute. Of course, Battelle has not released a killer virus into the world, as that would be uncontrollable, but the illusion of one so as to elicit enough fear to force the global population to stay home in order to lower greenhouse gas emissions and thus decarbonize as well as to accept being vaccinated and thus depopulate.

(The rest of this article will be published in September when I will have the time and resources to once again dedicate myself entirely to geopolitics.)

ⁱ <https://www.scientificamerican.com/article/why-ebola-survivors-struggle-with-new-symptoms/>